

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin: 5px 0;">(to be used for all correspondence after initial filing)</p>	<b>Application Number</b>	10/723,626
	<b>Filing Date</b>	November 26, 2003
	<b>First Named Inventor</b>	Daniel Pratt
	<b>Art Unit</b>	1616
	<b>Examiner Name</b>	A. J. H. Alstrum
	<b>Attorney Docket Number</b>	19043-501
<b>Total Number of Pages in This Submission</b>		

ENCLOSURES (Check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached (\$1,055.00)  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Completed Issue Fee Form PTOL-85		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 2px;"><b>Remarks</b></td> <td style="padding: 2px;">           The Director is hereby authorized to charge any additional fees that may be due, or credit any overpayment of the same to Deposit Account 50-0311, Ref. No. 19043-501.         </td> </tr> </table>			<b>Remarks</b>	The Director is hereby authorized to charge any additional fees that may be due, or credit any overpayment of the same to Deposit Account 50-0311, Ref. No. 19043-501.
<b>Remarks</b>	The Director is hereby authorized to charge any additional fees that may be due, or credit any overpayment of the same to Deposit Account 50-0311, Ref. No. 19043-501.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
<b>Firm Name</b>	MINTZ LEVIN COHN FERRIS GLOVSKY AND POPEO, P.C.		
<b>Signature</b>	/Sheridan Snedden/		
<b>Printed name</b>	Sheridan Snedden, Esq.		
<b>Date</b>	March 2, 2011	<b>Reg. No.</b>	55,998